## Half of the semester fee should be paid at the time of registration.

ලියාපදිංචි වීමේදී සමාසික ගාස්තුවෙන් හරි අඩක් ගෙවිය යුතුය.

## University of Colombo, Institute for Agro-Technology and Rural Sciences Application for Semester Registration

## Registration for First year Second Semester

	Registration N	BAg.Tec/
Name of the St	tudent: Full Time/Part	Time
1. Name	in Full:	
	with Initials:	
	nent Address:	
4. Teleph	none No:	
5. Refere	ence number of the payment made:	
	ence number will be received to your mobile phone as a text vater fee via online payment gateway)	when you completed the payment of
Academic Yea	Semester of the Studen	:: 1 2 3 4 5 6 7 8
Course Number	Course Title	Number of Credits
AT1213	Production and Management of Vegetables & Field Crops	3
AT1222	Pest and Disease Management	2
AT1233	Commercial Floriculture and Landscape Horticulture	3
AT1242	Soil and Plant Nutrient Management	2
FT1212	Ruminant Management	2
FT1223	Farm Power and Mechanization	3
FT1232	Introduction to Food and Nutrition	2
CC1210	Information Communication Technology	0
CC1220	English	0
Optional Cou	rse	
Course Number	Course Title	Number of Credits
Signature of th	ne Student: Date:	
Accounts Divi	ision	
Above named	student,	
i). has pa	id the total Semester fee	
•	rears of Semester fee	
,		
(Due p	payment: Rs)	
Signature of th	e authorized Officer :	
Date	:	
For Office Use Recommendat	e Only ion of the SAR/AR (or authorized officer):	narks: